

UNUSED MEDICINE MANAGMENT IN NEW HAMPSHIRE

MEETING MINUTES

Meeting Date: January 29, 2009

Prepared By: Brandon Kernen

The meeting began at 900 AM in Rooms 111-115 at the New Hampshire Department of Environmental Services' (NHDES) Offices in Concord, New Hampshire. A list of meeting participants is attached to these minutes. The list also includes additional stakeholders that could not attend the meeting but want to participate in the development of unused medicine management policies and outreach initiatives in New Hampshire.

Assistant Commissioner, Mike Walls of NHDES opened the meeting by welcoming attendees. Brandon Kernen of NHDES explained that NHDES began working on the issue of Pharmaceuticals and Personal Care Products in the environment several years ago in coordination with the New England Interstate Water Pollution Control Commission (NEIWPCC). Brandon explained that NEIWPCC sponsored a conference two years ago regarding pharmaceuticals and personal care products in the environment. Brandon explained that about a year ago, NHDES had an intra-departmental meeting about pharmaceuticals and personal care products in the environment. He explained that representatives from the Drinking Water, Wastewater, Air, Environmental Health and Waste programs at NHDES all attended the meeting. Brandon explained that of the various reasons that medicine is detected environment such as medicine use trends, medicine design and unused medicine disposal practices, it was determined at the intra-department meeting that the state was best in a position to immediately improve how unused medicine is disposed of. Brandon explained that other issues such as medicine design/green chemistry and medicine use trends were more complicated and in many respects much more a national issue. Brandon explained that NHDES realizes that the manner in which unused medicine is disposed of is only a smart part of the reason that pharmaceuticals are being detected in our nation's waters. He explained however, that medicine disposal is an issue that can be readily addressed and improved upon. Brandon explained that NHDES also realizes that medicine disposal policies are not only important for environmental reasons, but that drug abuse and poison control concerns are equally as or even more important. Brandon explained that for this reason, NHDES felt it would be prudent to coordinate with all of the different interests to attempt to align or develop policies for medicine disposal practices in New Hampshire and to market these policies together.

Brandon Kernen explained that NHDES has had a factsheet on its website for many years that provides useful information to the public on how do dispose of unwanted medicine. He explained that NHDES has not aggressively marketed this factsheet. Brandon also explained that he is not aware of any organization that has canvassed the state with a marketing message on medicine disposal. Brandon explained that the average person on the street does not know how to properly dispose of medicine. He explained that he hoped this group could develop medicine disposal policies and marketing efforts that will change this. Brandon explained that he feels the public is going to demand this. He explained that since the national press published stories about trace pharmaceuticals being present in many drinking water supplies in the nation, that NHDES receives calls from the public weekly on this topic. Brandon explained that while there is no environmental data in New Hampshire for this topic at this time, that there are 2-3 ongoing

projects that will likely detect at least trace levels of pharmaceuticals in some water resources of the state. Brandon explained that the public's concern about this topic will really peak as the results of these studies are published. Brandon noted that the pharmaceuticals in the environment occurrence studies have not identified any human health risks, but that they point to the need for more research on this topic. He explained that some studies have identified impacts to aquatic life.

After describing the background and the purpose of the meeting, Brandon Kernen asked if each person at the meeting could introduce themselves by stating: 1) Name; 2) Affiliation; 3) Interest in unused medicine management; 4) Unused medicine management initiatives; 5) Unused medicine management/disposal needs; and 6) Unused medicine management recommendations. Attached is a list of attendees. Many of the attendees at the meeting expressed a general interest in tracking the development of state policies on unused medicine disposal. The list of meeting attendees is attached to the minutes. Additional interests or activities associated with unused medicine disposal provided by the meeting attendees are provided on the attendees list. Additionally, a number of other interested parties that did not attend the meeting, but are interested in this topic are listed on the meeting attendees list.

Brandon Kernen noted that it appeared that the meeting had good representation from most of the pertinent stakeholders. He noted that representation of physicians, veterinarians and law enforcement was low. He also noted that a regional water system conference is occurring at the same time as this meeting, so many water systems could not attend. He also noted that several people could not make the meeting because of the snow storm the previous night. One of the meeting's participants suggested that the meeting did not have any representatives from schools. Brandon agreed and explained that school nurses accumulate a significant amount of medication sent in by parents throughout the school year, but that it is not picked up by parents. This leaves them with an unused medicine disposal challenge at the end of the school year and that much of the medicine is then dumped into the school's wastewater system. A meeting participant explained that the ten community coalitions in the state have contacts with the schools and could bring information back to them. Another meeting participant explained that analytical labs that may test pharmaceuticals should be represented. It was also suggested that the American Medical Association be invited to attend future meetings. It was also suggested that private insurers be invited to future meetings because of the trend of medicine distribution seems to be dispensing a ninety day supply of medicine via mail order, opposed to a thirty day supply that is often dispensed at walk-in pharmacies. It was noted that dispensing a ninety day supply of medicine increases the volume of unused medication when patients quit taking the medication for one reason or another. It was also suggested that the Veterans Health Administration be invited to attend meetings. Another person suggested that entities responsible for distributing free medicine samples in medical offices be included in these meetings because much of this material is not used. Lastly, it was suggested that the Northeast Recycling Council be invited to future meetings because they have developed medicine collection guidance documents.

Next, Nancy Coffey of the United States Drug Enforcement Agency(USDEA) described an advanced rulemaking notice her agency had issued regarding the disposal of dispensed and unused controlled medicines. She explained that USDEA does not often amend its rules and that the rulemaking process is lengthy so she really encourages people to provide their comments. Nancy noted that the comment period for the proposed rule ends March 23, 2009. She noted that the agenda provided a web link to the official rulemaking notice.

Nancy was asked if USDEA was aware of any effective unused medicine management initiatives. She explained that she is most familiar with initiatives in Massachusetts and that some communities had conducted takeback programs. She also explained that some police stations in some Massachusetts communities have drop-off/mailbox collection devices.

Nancy explained that that the disposal of controlled medicine is only a small portion of the overall medicine disposal challenge. She explained that under the current regulations that the only way a collection program could be conducted is if it is in the presence of a law enforcement official.

Sarah Silk explained that the Lakes Region Household Hazardous Product facility has utilized the Northeast Recycling Council's medicine collection protocol to conduct collection events for the past four years. Sarah noted that the facility has doubled the amount of pharmaceuticals collected each year and now collects off-site in Alton. She explained that the facility has also trained the Nashua Regional Solid Waste District/Nashua Regional Planning Commission which has conducted two collection events.

Next, Brandon Kernen and Wendy Bonner described the United States Environmental Protection Agency's initiative to amend the Universal Waste Rule to include pharmaceuticals. It was explained that the proposed amendments to the Universal Waste Rule would lessen some of the storage and manifesting requirements for pharmaceutical hazardous waste. It was explained that NHDES would be providing comments to USEPA on the proposed rule and the public comment period for the rule had just been extended to 03/04/09. Janet Bowen of USEPA explained that even if USEPA amends their Universal Waste Rules, that it will be up to the states to determine if they want to adopt USEPA's approach to managing pharmaceuticals that are hazardous waste or establish their own state-specific requirements. A meeting participant explained that currently, an impediment to conducting unused medicine collection events is that under existing law and regulations, the facility collecting unused medicine from residents that is then considered hazardous waste at the collection facility becomes legally responsible for the hazardous waste. It was suggested that this issue be addressed in the Universal Waste Rule. The meeting agenda included a link to USEPA's website on the proposed rule changes.

Next, an update on pending legislation in New Hampshire relative to managing unused medicine was provided by Brandon Kernen. Brandon explained that NHDES was not involved in developing any of the legislative initiatives. Brandon provided a summary of the proposed

provisions for House Bill 324, Senate Bill 84 and House Bill 607. The meeting agenda included an internet link to the legislation.

Next, the meeting focused on future steps that the state needs to take to develop unused medicine disposal policies. Brandon Kernen noted that the various attendees at the meeting had different interests relative to how to dispose of unused medicine. Brandon explained one possible approach is to develop work groups to focus on different medicine disposal use settings such as 1) residential settings; 2) long-term health care facilities; 3) school nurses offices; 4) hospitals; 5) veterinarian offices; and 6) doctor's offices.

One meeting attendee suggested that we should develop an approach for communities to collaborate with physicians, pharmacists, law enforcement and regulatory agencies to handle the disposal of these wastes in all settings.

Sarah Silk suggested that we develop training for solid waste stakeholders because they are on the frontline and are receiving questions routinely on this topic.

Gary Merchant suggested that getting to work on a state policy for disposing of unused medicine in a residential setting is more urgent than addressing other regulatory settings because there is no regulatory oversight for this at this time. He described that there is at least some regulatory oversight for how materials are managed in the other medicine use settings.

Garret Graaskamp explained that implementing a successful medicine disposal policy will come down to education. He explained that the educational message needs to be simple. He explained that the national advertising campaign for the conversion of signals for televisions to digital is a good example how people can be effectively educated.

Lindsey Waterhouse explained that forming work groups for the various medicine settings is appropriate. He explained that there is a need right now to have some interim guidance because people are dealing with unused pharmaceuticals everyday.

A meeting attendee stated that the proposed work groups all represented the generators of unused medicine. She explained that the disposal groups such as waste management firms, reverse distributors, solid waste facility operators and wastewater facility operators should be brought together to develop appropriate disposal policies.

Another meeting attendee explained that as we develop guidance, we need to make sure it is practical. She explained that in a hospital setting for instance, there are several scales at which unused medicine may be managed. She explained that the pharmacy for instance may have more capacity to deal with material management issues than a nurse who is covering ten beds and is administering partial doses of medicine to different people throughout her/his shift. She explained that the nurse must have a practical medicine disposal options because it is only a

minor aspect of other oftentimes more critical job related obligations the nurse must contend with.

Melissa Heinen explained that she agrees that educational messages on how to dispose of medicine needs to be simple but that the problem is that this is not a simple issue. She noted that she researched unused medicine disposal policies for eighteen different agencies and found that there were twelve different suggested approaches for disposing of unused medicine.

Another meeting attendee explained that she thinks we should have long-term and short-term goals. For example, she explained that we need to assess what is the immediate message we want to get to people about disposing of their unused medicine. She explained we should work to get that message out and then start work on developing more optimal unused medicine disposal options for the state.

Another meeting attendee explained that any policies that are developed for disposing of unused medicine needs to be comprehensive. She explained that she has find there to be a lot of smaller issues that create barriers to effectively collect and dispose of unwanted medicine. She explained that any policy that does not assist with addressing these problems would not be that helpful.

A meeting attendee asked Brandon Kernen if incineration is an appropriate disposal method for unused medicine. Brandon explained that incineration at a permitted facility with scrubbers such as a municipal incinerator is acceptable. He explained that burning unused medicine in burn piles or in other settings such as funeral parlors is not acceptable and could endanger human health. Brandon noted that certain medicines stipulate specific disposal techniques and that these should always be followed.

A meeting attendee explained that unused medicine disposal policies for New Hampshire need to be sensitive to the varying population density of the state. She explained that programs in the northern part of the state where population density is very low may need to be different than the southern part of the state where the density is higher. She also explained the programs may need to be different in regions with higher substance abuse problems.

A meeting attendee suggested that Pharmaceutical Research and Manufactures of America be asked to attend future meetings and possibly contribute funding to outreach initiatives. It was explained that the airwaves are flooded with advertisements for pharmaceuticals. It would likely only take a fraction of the funding that is required for these advertisements to assist with the costs associated with disposing of unused medicine or educating the public about proper disposal practices. Lindsey Waterhouse explained that Dartmouth has tried to include medicine labeling requirements that describe proper disposal methods for medicine as part of its procurement procedures, but has not been successful. He suggested that the state take a role in encouraging medicine labeling to assist with proper disposal.

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A meeting attendee suggested that a work group be formed to assist with risk communication. It was explained that this will assist with the public communications as pharmaceuticals in the environment occurrence studies for New Hampshire are completed.

A meeting attendee suggested that another workgroup be formed to address unused medicine disposal at hospice facilities due to the type of medicine that is used, the high rate of turnover at the facilities and large volume of unused medicine that is often left over from patients.

The meeting ended with Brandon Kernen explaining that NHDES would develop and distribute meeting minutes and the attendee list. Brandon also explained that NHDES would organize the initial work group meetings.